



# Effective Health Care

## Depression After Stroke Nomination Summary Document

### Results of Topic Selection Process & Next Steps

- The topic, Depression After Stroke, was found to be addressed by evidence-based guidelines from the Canadian Stroke Network and the Heart and Stroke Foundation of Canada, titled *Canadian Best Practice Recommendations for Stroke Care*. Given that the existing guideline covers this nomination, no further activity will be undertaken on this topic
  - Lindsay MP, Gubitz G, Bayley M, Phillips S. and Smith EE. Canadian Stroke Best Practice Recommendations Fifth Edition (Update 2014-2015). On behalf of the Canadian Stroke Best Practices Advisory Committee. 2014; Ottawa, Ontario Canada: Canadian Stroke Network. Retrieved September 14, 2015, from <http://www.strokebestpractices.ca/>

### Topic Description

**Nominator(s):** Individual

**Nomination Summary:** The nominator is interested in the comparative effectiveness of depression screening tools for patients who have experienced a stroke. The nominator is also interested in the comparative effectiveness of treatment options for patients who have experienced a stroke. For the purposes of this brief, we included research on the comparative effectiveness of the most common mental health screening tools, as well as pharmacological and non-pharmacological mental health interventions for patients who have experienced a stroke.

#### **Staff-Generated PICO**

**Population(s):** Adult patients who have experienced a stroke

**Intervention(s):** Mental health screening tools for adult patients who have experienced a stroke; patient referrals; pharmacological and non-pharmacological interventions for adult patients who have experienced a stroke

**Comparator(s):** All other treatment options

**Outcome(s):** Positive mental health outcomes for adults who have experienced a stroke, including effective screening and treatment for depression; improved health-related quality of life (HRQoL)

**Key Questions from Nominator:**

1. For adult patients who have experienced a stroke, what is the comparative effectiveness of the most common mental health screening tools (particularly for depression)?
2. For adult patients who have experienced a stroke, what is the comparative effectiveness of pharmacological and non-pharmacological mental health interventions (particularly for depression)?

## Considerations

- A clinically apparent stroke is a potentially disabling entity, as is post-stroke depression (PSD). PSD has a prevalence rate of 9% to 34% in the initial three to six months following stroke. PSD is a potentially treatable, yet under-diagnosed, condition, and has a negative effect on functional recovery and survival of stroke patients.
- Our search identified best practice recommendations from the Canadian Stroke Network and the Heart and Stroke Foundation of Canada, titled *Canadian Stroke Best Practice Recommendations*, that are intended to provide up-to-date evidence-based guidelines for the prevention and management of stroke. The goal of disseminating and implementing these recommendations is to reduce practice variations in the care of stroke patients and to reduce the gap between knowledge and practice. Recommendations are updated every two years to ensure that they continue to reflect contemporary stroke research evidence and leading expert opinion. Relevant recommendations focus on the following areas:
  - Screening for post stroke depression (e.g., use of a stroke-specific depression screening tool; screening should take place at various stages throughout the continuum of stroke care);
  - Assessment for post stroke depression (e.g., patients identified as being at risk for depression during screening should be managed by a healthcare professional with expertise in diagnosis and management of depression in stroke patients; use population-specific assessment measures);
  - Treatment and management modalities (e.g., pharmacotherapy, non-pharmacological and adjunct treatment, other mood symptoms [anxiety], post stroke emotional incontinence);
  - Prevention of post stroke depression (e.g., motivational interviewing), and;
  - Ongoing monitoring, support and education (e.g., patients should be given information and education about the potential impact of stroke on their mood and that of family and caregivers).